

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      ADAIR COUNTY BOARD OF EDUCATION<br>Street Address     1204 GREENSBURG ST<br>City, State Zip     COLUMBIA, KY 42728   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$55,272.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |  |  |
|----|--|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      BALLARD COUNTY BOARD OF EDUCATION<br>Street Address     RT 1 3465 PADUCAH RD<br>City, State Zip     BARLOW, KY 42024   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$27,498.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>  |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

## Kentucky Department of Education

**REVISED** Award Notification

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name BARBOURVILLE IND BOARD OF EDUCATION<br>Street Address P.O. BOX 520<br>City, State Zip BARBOURVILLE, KY 40906   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 <b>REVISED</b> Award Amount:</b><br>\$13,967.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |   |  |
|----|---|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      BARDSTOWN IND BOARD OF EDUCATION<br>Street Address    308 NORTH 5TH<br>City, State Zip    BARDSTOWN, KY 40004   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address            500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact            Vickie Terry: 502-564-1979 ext. 4330<br>Street Address            500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                Frankfort, KY 40601                | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                FY15 Title VI-Rural and Low Income<br>Fund Source                NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                        84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number    350A<br>MOA Number                N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   |  |
| 5  | <b>REVISED Award Amount:</b><br>\$52,791.00   | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |  |

## REVISED Award Notification

|    |  |  |
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| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      BARREN COUNTY BOARD OF EDUCATION<br>Street Address    P.O. BOX 879<br>City, State Zip    GLASGOW, KY 42141   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$99,632.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |



## REVISED Award Notification

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| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      BATH COUNTY BOARD OF EDUCATION<br>Street Address    405 WEST MAIN STREET<br>City, State Zip    OWINGSV, KY 40360   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$42,844.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      BELL COUNTY BOARD OF EDUCATION<br>Street Address     211 VIRGINIA AVENUE<br>City, State Zip     PINEVILLE, KY 40977  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$59,131.00  | <b>11 Evaluations:</b><br><br><br><br>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

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| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      BERA IND BOARD OF EDUCATION<br>Street Address    3 PIRATE PARKWAY<br>City, State Zip    BERA, KY 40403   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$23,547.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |



**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name BRACKEN COUNTY BOARD OF EDUCATION<br>Street Address 348 WEST MIAMI ST<br>City, State Zip BROOKSVILL, KY 41004  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$26,074.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
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| <b>1 Name and Address of Recipient:</b><br>Agency Name      BREATHITT COUNTY BOARD OF EDUCATION<br>Street Address    P.O. BOX 750<br>City, State Zip     JACKSON, KY 41339   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$42,476.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <span style="float: right;"><b>Date:</b> October 3, 2014</span>   |   |

## REVISED Award Notification

|    |  |  |                              |   |
|----|--|--|------------------------------|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      BRECKINRIDGE COUNTY BOARD OF EDUCATION<br>Street Address      P.O. BOX 148<br>City, State Zip      HARDINSBURG, KY 40143   |  | 7                            | <b>Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
|    | 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address      500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact      Vickie Terry: 502-564-1979 ext. 4330<br>Street Address      500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip      Frankfort, KY 40601 | 8                            | <b>Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description      FY15 Title VI-Rural and Low Income<br>Fund Source      NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#      84.358B<br>PR/AWARD NUMBER (FAIN)      S358B140017<br>MUNIS Project Number      350A<br>MOA Number      N/A |  | 9                            | <b>Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
|    | 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | 10                           | <b>Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____   |
| 5  | <b>REVISED Award Amount:</b><br>\$57,385.00  | 11   | <b>Evaluations:</b>          |   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |                              |   |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |                              |   |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |                              |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits  |  | <b>Date:</b> October 3, 2014 |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name BUTLER COUNTY BOARD OF EDUCATION<br>Street Address P.O. BOX 339<br>City, State Zip MORGANTOWN, KY 42261  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$46,175.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name CALDWELL COUNTY BOARD OF EDUCATION<br>Street Address P.O. BOX 229<br>City, State Zip PRINCETON, KY 42445   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$42,752.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |



**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      CALLOWAY COUNTY BOARD OF EDUCATION<br>Street Address    P.O. BOX 800<br>City, State Zip     MURRAY, KY 42071   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$65,426.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      CAMPBELLSVILLE IN BOARD OF EDUCATION<br>Street Address     136 S COLUMBIA<br>City, State Zip     CAMPBELLSVILL, KY 42718   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$23,937.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |  |  |
|----|--|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      CARLISLE COUNTY BOARD OF EDUCATION<br>Street Address     ROUTE 1 HIGHWAY 1377<br>City, State Zip     BARDWEL, KY 42023   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$15,989.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      CARROLL COUNTY BOARD OF EDUCATION<br>Street Address     813 HAWKINS ST<br>City, State Zip     CARROLLTON, KY 41008   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$39,674.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |   |  |
|----|---|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      CARTER COUNTY BOARD OF EDUCATION<br>Street Address    228 S CAROL MALONE BLVD<br>City, State Zip    GRAYSON, KY 41143   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address            500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact            Vickie Terry: 502-564-1979 ext. 4330<br>Street Address            500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                Frankfort, KY 40601                | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                FY15 Title VI-Rural and Low Income<br>Fund Source                NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                        84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number    350A<br>MOA Number                N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   |  |
| 5  | <b>REVISED Award Amount:</b><br>\$97,472.00   | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |  |



**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name CASEY COUNTY BOARD OF EDUCATION<br>Street Address 1922 N US 127<br>City, State Zip LIBERTY, KY 42539   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$47,438.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      CAVERNA INDEPENDENT BOARD OF EDUCATION<br>Street Address    1102 N DIXIE HWY<br>City, State Zip    CAVE CITY, KY 42127  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                          | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)    S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$14,840.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      CLAY COUNTY BOARD OF EDUCATION<br>Street Address    128 RICHMOND RD<br>City, State Zip    MANCHESTER, KY 40962   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                           | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)    S358B140017<br>MUNIS Project Number        350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$68,527.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <span style="float: right;"><b>Date:</b> October 3, 2014</span>   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name CLINTON COUNTY BOARD OF EDUCATION<br>Street Address RT 4 BOX 100 HWY 127<br>City, State Zip ALBANY, KY 42602   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$36,182.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      CORBIN INDEPENDENT BOARD OF EDUCATION<br>Street Address    108 ROY KIDD AVE<br>City, State Zip    CORBIN, KY 40701   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$60,464.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |



## REVISED Award Notification

|    |  |  |                              |   |
|----|--|--|------------------------------|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      CRITTENDEN COUNTY BOARD OF EDUCATION<br>Street Address      W ELM ST<br>City, State Zip      MARION, KY 42064  |  | 7                            | <b>Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
|    | 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address      500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact      Vickie Terry: 502-564-1979 ext. 4330<br>Street Address      500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip      Frankfort, KY 40601 | 8                            | <b>Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description      FY15 Title VI-Rural and Low Income<br>Fund Source      NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#      84.358B<br>PR/AWARD NUMBER (FAIN)      S358B140017<br>MUNIS Project Number      350A<br>MOA Number      N/A |  | 9                            | <b>Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
|    | 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | 10                           | <b>Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____   |
| 5  | <b>REVISED Award Amount:</b><br>\$26,005.00  | 11   | <b>Evaluations:</b>          |   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |                              |   |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |                              |   |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |                              |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits  |  | <b>Date:</b> October 3, 2014 |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name CUMBERLAND COUNTY BOARD OF EDUCATION<br>Street Address 810 N MAIN ST<br>City, State Zip BURKESVILLE, KY 42717  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$20,744.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      DANVILLE INDEPENDENT BOARD OF EDUCATION<br>Street Address     359 PROCTOR ST<br>City, State Zip     DANVILLE, KY 40422   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$37,928.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |  |  |
|----|--|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      DAWSON SPRINGS INDEPENDENT BOARD OF EDUCATION<br>Street Address    118 E ARCADIA AVE<br>City, State Zip     DAWSON SPRINGS, KY 42408   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$13,071.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

## REVISED Award Notification

|    |   |  |
|----|---|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name EDMONSON COUNTY BOARD OF EDUCATION<br>Street Address 100 HIGH SCHOOL RD<br>City, State Zip BROWNSVILLE, KY 42210   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   |  |
| 5  | <b>REVISED Award Amount:</b><br>\$39,444.00   | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |  |



## REVISED Award Notification

|    |   |    |   |
|----|---|----|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      ELLIOTT COUNTY BOARD OF EDUCATION<br>Street Address    MAIN ST<br>City, State Zip    SANDY HOOK, KY 41171   | 7  | <b>Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address            500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact            Vickie Terry: 502-564-1979 ext. 4330<br>Street Address            500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                Frankfort, KY 40601                | 8  | <b>Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                FY15 Title VI-Rural and Low Income<br>Fund Source                NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                        84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number    350A<br>MOA Number                N/A | 9  | <b>Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   |    |   |
| 5  | <b>REVISED Award Amount:</b><br>\$21,939.00   | 10 | <b>Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  | 11 | <b>Evaluations:</b>   |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |    |   |
| 13 | <b>Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |    |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits   |    | <b>Date:</b> October 3, 2014  |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      EMINENCE INDEPENDENT BOARD OF EDUCATION<br>Street Address     114 S PENN AVE<br>City, State Zip     EMINENCE, KY 40019   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$15,024.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <span style="float: right;"><b>Date:</b> October 3, 2014</span>   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name ESTILL COUNTY BOARD OF EDUCATION<br>Street Address 253 MAIN ST<br>City, State Zip IRVINE, KY 40336   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$50,402.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      FLEMING COUNTY BOARD OF EDUCATION<br>Street Address     211 W WATER ST<br>City, State Zip     FLEMINGSBURG, KY 41041   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$48,288.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name FLOYD COUNTY BOARD OF EDUCATION<br>Street Address 106 N FRONT AVE<br>City, State Zip PRESTONSBURG, KY 41653  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$128,256.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |



**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      GALLATIN COUNTY BOARD OF EDUCATION<br>Street Address     600 MAIN ST<br>City, State Zip     WARSAW, KY 41095   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$34,229.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

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|----|---|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      GARRARD COUNTY BOARD OF EDUCATION<br>Street Address    322 W MAPLE ST<br>City, State Zip    LANCASTER, KY 40444   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address            500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact            Vickie Terry: 502-564-1979 ext. 4330<br>Street Address            500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                Frankfort, KY 40601                | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                FY15 Title VI-Rural and Low Income<br>Fund Source                NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                        84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number    350A<br>MOA Number                N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| 5  | <b>REVISED Award Amount:</b><br>\$52,469.00   | <b>11 Evaluations:</b>  |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |   |
| 13 | <b>Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits   | <b>Date:</b> October 3, 2014  |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      GLASGOW INDEPENDENT BOARD OF EDUCATION<br>Street Address     1108 CLEVELAND AVE<br>City, State Zip     GLASGOW, KY 42142   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                           | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)    S358B140017<br>MUNIS Project Number        350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$41,879.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014  |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
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| <b>1 Name and Address of Recipient:</b><br>Agency Name      GRAVES COUNTY BOARD OF EDUCATION<br>Street Address     2290 STATE RT 121 N<br>City, State Zip     MAYFIELD, KY 42066   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$95,841.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      GRAYSON COUNTY BOARD OF EDUCATION<br>Street Address     909 BRANDENBURG RD<br>City, State Zip     LEITCHFIELD, KY 42754  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$89,800.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |



**Kentucky Department of Education**

**REVISED Award Notification**

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|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name GREEN COUNTY BOARD OF EDUCATION<br>Street Address 206 W COURT ST<br>City, State Zip GREENSBURG, KY 42743   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$33,839.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |  |   |                              |   |
|----|--|---|------------------------------|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name HARLAN COUNTY BOARD OF EDUCATION<br>Street Address 251 BALL PARK RD<br>City, State Zip HARLAN, KY 40831   |   | 7                            | <b>Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
|    | 2  | <b>KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | 8                            | <b>Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A |   | 9                            | <b>Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
|    | 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | 10                           | <b>Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____   |
| 5  | <b>REVISED Award Amount:</b><br>\$86,377.00  | 11  | <b>Evaluations:</b>          |   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |                              |   |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |   |                              |   |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |                              |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits  |   | <b>Date:</b> October 3, 2014 |   |

## REVISED Award Notification

|    |   |  |
|----|---|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name HARLAN INDEPENDENT BOARD OF EDUCATION<br>Street Address 420 E CENTRAL ST<br>City, State Zip HARLAN, KY 40831   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   |  |
| 5  | <b>REVISED Award Amount:</b><br>\$15,438.00   | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |  |

## REVISED Award Notification

|    |  |  |
|----|--|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      HARRISON COUNTY BOARD OF EDUCATION<br>Street Address    324 WEBSTER AVE<br>City, State Zip    CYNTHIANA, KY 41031  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$63,955.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

## REVISED Award Notification

|    |   |   |
|----|---|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      HART COUNTY BOARD OF EDUCATION<br>Street Address    511 W UNION ST<br>City, State Zip    MUNFORDVILLE, KY 42765   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address            500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact            Vickie Terry: 502-564-1979 ext. 4330<br>Street Address            500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                Frankfort, KY 40601                | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                FY15 Title VI-Rural and Low Income<br>Fund Source                NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                        84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number    350A<br>MOA Number                N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| 5  | <b>REVISED Award Amount:</b><br>\$48,977.00   | <b>11 Evaluations:</b>  |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |   |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |



## REVISED Award Notification

|    |   |    |   |
|----|---|----|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      HAZARD INDEPENDENT BOARD OF EDUCATION<br>Street Address    325 BROADWAY<br>City, State Zip    HAZARD, KY 41701  | 7  | <b>Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address            500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact            Vickie Terry: 502-564-1979 ext. 4330<br>Street Address            500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                Frankfort, KY 40601                | 8  | <b>Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                FY15 Title VI-Rural and Low Income<br>Fund Source                NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                        84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number    350A<br>MOA Number                N/A | 9  | <b>Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   |    |   |
| 5  | <b>REVISED Award Amount:</b><br>\$19,710.00   | 10 | <b>Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  | 11 | <b>Evaluations:</b>   |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |    |   |
| 13 | <b>Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |    |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits   |    | <b>Date:</b> October 3, 2014  |

## REVISED Award Notification

|    |   |   |
|----|---|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      HICKMAN COUNTY BOARD OF EDUCATION<br>Street Address    416 WATERFIELD DR<br>City, State Zip    CLINTON, KY 42031  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address            500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact            Vickie Terry: 502-564-1979 ext. 4330<br>Street Address            500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                Frankfort, KY 40601                | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                FY15 Title VI-Rural and Low Income<br>Fund Source                NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                        84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number    350A<br>MOA Number                N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| 5  | <b>REVISED Award Amount:</b><br>\$16,242.00   | <b>11 Evaluations:</b>  |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |   |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      HOPKINS COUNTY BOARD OF EDUCATION<br>Street Address     320 S SEMINARY ST<br>City, State Zip     MADISONVILLE, KY 42431  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$145,875.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name JACKSON COUNTY BOARD OF EDUCATION<br>Street Address HWY 421<br>City, State Zip MCKEE, KY 40447   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$44,268.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      JOHNSON COUNTY BOARD OF EDUCATION<br>Street Address     253 N MAYO TR<br>City, State Zip     PAINTSVILLE, KY 41240   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$78,015.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><div style="text-align: right;"><b>Date:</b> October 3, 2014</div>   |   |



**Kentucky Department of Education**

**REVISED Award Notification**

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|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      KNOTT COUNTY BOARD OF EDUCATION<br>Street Address     RT 160<br>City, State Zip     HINDMAN, KY 41822  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$50,011.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      KNOX COUNTY BOARD OF EDUCATION<br>Street Address     200 DANIEL BOONE DR<br>City, State Zip     BARBOURVILLE, KY 40906   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$91,522.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><div style="text-align: right;"><b>Date:</b> October 3, 2014</div>   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      LARUE COUNTY BOARD OF EDUCATION<br>Street Address    2375 LINCOLN FARM RD<br>City, State Zip    HODGENVILLE, KY 42748  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$51,573.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name LAUREL COUNTY BOARD OF EDUCATION<br>Street Address 275 S LAUREL RD<br>City, State Zip LONDON, KY 40744   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$194,321.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      LAWRENCE COUNTY BOARD OF EDUCATION<br>Street Address     HWY 644<br>City, State Zip     LOUISA, KY 41230   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$49,827.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |



## REVISED Award Notification

|    |  |  |
|----|--|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      LEE COUNTY BOARD OF EDUCATION<br>Street Address    58 CENTER ST<br>City, State Zip    BEATTYVILLE, KY 41311  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$21,985.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

## REVISED Award Notification

|    |  |  |
|----|--|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      LESLIE COUNTY BOARD OF EDUCATION<br>Street Address    108 MAPLE ST<br>City, State Zip    HYDEN, KY 41749   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$37,101.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
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| <b>1 Name and Address of Recipient:</b><br>Agency Name     LETCHER COUNTY BOARD OF EDUCATION<br>Street Address    224 PARKS ST<br>City, State Zip    WHITESBURG, KY 41858  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant     Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address            500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact            Vickie Terry: 502-564-1979 ext. 4330<br>Street Address            500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                Frankfort, KY 40601                          | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                FY15 Title VI-Rural and Low Income<br>Fund Source                NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                        84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$66,781.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><div style="text-align: right;"><b>Date:</b> October 3, 2014</div>   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      LEWIS COUNTY BOARD OF EDUCATION<br>Street Address     520 PLUMMER LN<br>City, State Zip     VANCEBURG, KY 41179  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$48,587.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      LINCOLN COUNTY BOARD OF EDUCATION<br>Street Address     305 DANVILLE AVE<br>City, State Zip     STANFORD, KY 40484   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$81,483.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |



**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name LIVINGSTON COUNTY BOARD OF EDUCATION<br>Street Address 127 E ADAIR ST<br>City, State Zip SMITHLAND, KY 42081   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$25,063.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      LOGAN COUNTY BOARD OF EDUCATION<br>Street Address     2222 BOWLING GREEN RD<br>City, State Zip     RUSSELLVILLE, KY 42276  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$74,224.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name LYON COUNTY BOARD OF EDUCATION<br>Street Address 217 JENKINS RD<br>City, State Zip EDDYVILLE, KY 42038   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$18,723.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      MAGOFFIN COUNTY BOARD OF EDUCATION<br>Street Address     GARDNER TR<br>City, State Zip     SALYERSVILLE, KY 41465  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$44,521.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      MARION COUNTY BOARD OF EDUCATION<br>Street Address     755 E MAIN ST<br>City, State Zip     LEBANON, KY 40033  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$66,505.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |



## REVISED Award Notification

|    |  |  |
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| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      MARTIN COUNTY BOARD OF EDUCATION<br>Street Address     RT 40<br>City, State Zip     INEZ, KY 41224   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$42,568.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>  |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
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| <b>1 Name and Address of Recipient:</b><br>Agency Name      MASON COUNTY BOARD OF EDUCATION<br>Street Address     2ND AND LIMESTONE<br>City, State Zip     MAYSVILLE, KY 41056   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$58,626.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |   |   |
|----|---|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name MAYFIELD INDEPENDENT BOARD OF EDUCATION<br>Street Address 709 S EIGHTH ST<br>City, State Zip MAYFIELD, KY 42066  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| 5  | <b>REVISED Award Amount:</b><br>\$33,907.00   | <b>11 Evaluations:</b>  |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |   |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      MCCREARY COUNTY BOARD OF EDUCATION<br>Street Address     120 RAIDER WAY<br>City, State Zip     STEARNS, KY 42647   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$60,923.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <span style="float: right;"><b>Date:</b> October 3, 2014</span>   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
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| <b>1 Name and Address of Recipient:</b><br>Agency Name      MCLEAN COUNTY BOARD OF EDUCATION<br>Street Address    283 MAIN ST<br>City, State Zip    CALHOUN, KY 42327  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$33,632.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <span style="float: right;"><b>Date:</b> October 3, 2014</span>   |   |



**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
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| <b>1 Name and Address of Recipient:</b><br>Agency Name      MENIFEE COUNTY BOARD OF EDUCATION<br>Street Address      BACK STREET<br>City, State Zip      FRENCHBURG, KY 40322  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address      500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact      Vickie Terry: 502-564-1979 ext. 4330<br>Street Address      500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip      Frankfort, KY 40601   | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description      FY15 Title VI-Rural and Low Income<br>Fund Source      NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#      84.358B<br>PR/AWARD NUMBER (FAIN)      S358B140017<br>MUNIS Project Number      350A<br>MOA Number      N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$22,031.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014  |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      MERCER COUNTY BOARD OF EDUCATION<br>Street Address     961 MOBERLY RD<br>City, State Zip     HARRODSBURG, KY 40330   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$61,107.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      METCALFE COUNTY BOARD OF EDUCATION<br>Street Address     1007 W STOCKTON<br>City, State Zip     EDMONTON, KY 42129   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$31,633.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |   |    |   |
|----|---|----|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name MIDDLESBORO INDEPENDENT BOARD OF EDUCATION<br>Street Address 220 N 20TH ST<br>City, State Zip MIDDLESBORO, KY 40965  | 7  | <b>Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | 8  | <b>Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | 9  | <b>Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   |    |   |
| 5  | <b>REVISED Award Amount:</b><br>\$26,533.00   | 10 | <b>Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016  | 11 | <b>Evaluations:</b>   |
| 12 | <b>Consortia/Partnership Members:</b> N/A   |    |   |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |    |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits   |    | <b>Date:</b> October 3, 2014  |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      MONROE COUNTY BOARD OF EDUCATION<br>Street Address      1209 N MAIN ST<br>City, State Zip      TOMPKINSVILLE, KY 42167   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address      500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact      Vickie Terry: 502-564-1979 ext. 4330<br>Street Address      500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip      Frankfort, KY 40601   | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description      FY15 Title VI-Rural and Low Income<br>Fund Source      NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#      84.358B<br>PR/AWARD NUMBER (FAIN)      S358B140017<br>MUNIS Project Number      350A<br>MOA Number      N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$38,755.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014  |   |



**Kentucky Department of Education**

**REVISED Award Notification**

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|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name MONTGOMERY COUNTY BOARD OF EDUCATION<br>Street Address 212 N MAYSVILLE ST<br>City, State Zip MT STERLING, KY 40353   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$99,471.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      MORGAN COUNTY BOARD OF EDUCATION<br>Street Address      496 PRESTONSBURG ST<br>City, State Zip      WEST LIBERTY, KY 41472   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address      500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact      Vickie Terry: 502-564-1979 ext. 4330<br>Street Address      500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip      Frankfort, KY 40601   | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description      FY15 Title VI-Rural and Low Income<br>Fund Source      NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#      84.358B<br>PR/AWARD NUMBER (FAIN)      S358B140017<br>MUNIS Project Number      350A<br>MOA Number      N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$44,245.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014  |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name MUHLENBERG COUNTY BOARD OF EDUCATION<br>Street Address 510 W MAIN ST<br>City, State Zip GREENVILLE, KY 42345   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$107,098.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      MURRAY INDEPENDENT BOARD OF EDUCATION<br>Street Address     208 S 13TH ST<br>City, State Zip     MURRAY, KY 42071  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$31,955.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      NICHOLAS COUNTY BOARD OF EDUCATION<br>Street Address     395 W MAIN ST<br>City, State Zip     CARLISLE, KY 40311   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$23,731.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |



**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name OHIO COUNTY BOARD OF EDUCATION<br>Street Address 315 E UNION ST<br>City, State Zip HARTFORD, KY 42347  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$85,343.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
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| <b>1 Name and Address of Recipient:</b><br>Agency Name      OWEN COUNTY BOARD OF EDUCATION<br>Street Address    1600 HWY 22 E<br>City, State Zip    OWENTON, KY 40359  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$38,755.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      OWSLEY COUNTY BOARD OF EDUCATION<br>Street Address     COURT AND MAIN<br>City, State Zip     BOONEVILLE, KY 41314  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$15,093.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014  |   |

## REVISED Award Notification

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| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      PAINTSVILLE INDEPENDENT BOARD OF EDUCATION<br>Street Address     305 2ND ST<br>City, State Zip     PAINTSVILLE, KY 41240   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$16,425.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>  |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      PENDLETON COUNTY BOARD OF EDUCATION<br>Street Address    2525 HWY 27 N<br>City, State Zip    FALMOUTH, KY 41040  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$51,527.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <span style="float: right;"><b>Date:</b> October 3, 2014</span>   |   |



## REVISED Award Notification

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| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      PERRY COUNTY BOARD OF EDUCATION<br>Street Address    315 PARK AVE<br>City, State Zip    HAZARD, KY 41701   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$83,758.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

## REVISED Award Notification

|    |  |  |
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| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      PIKE COUNTY BOARD OF EDUCATION<br>Street Address    314 S MAYO TR<br>City, State Zip    PIKEVILLE, KY 41502  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$193,245.00   | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>  |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name     PIKEVILLE INDEPENDENT BOARD OF EDUCATION<br>Street Address    401 N MAYO TR<br>City, State Zip    PIKEVILLE, KY 41502   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant     Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address             500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact            Vickie Terry: 502-564-1979 ext. 4330<br>Street Address             500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                 Frankfort, KY 40601                       | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                FY15 Title VI-Rural and Low Income<br>Fund Source                NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                        84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$25,775.00  | <b>11 Evaluations:</b><br><br><br><br><br>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      POWELL COUNTY BOARD OF EDUCATION<br>Street Address      691 BRECKINRIDGE ST<br>City, State Zip      STANTON, KY 40380  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address      500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact      Vickie Terry: 502-564-1979 ext. 4330<br>Street Address      500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip      Frankfort, KY 40601   | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description      FY15 Title VI-Rural and Low Income<br>Fund Source      NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#      84.358B<br>PR/AWARD NUMBER (FAIN)      S358B140017<br>MUNIS Project Number      350A<br>MOA Number      N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$50,631.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014  |   |

## REVISED Award Notification

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| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      PULASKI COUNTY BOARD OF EDUCATION<br>Street Address    501 UNIVERSITY DR<br>City, State Zip    SOMERSET, KY 42502  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$168,595.00   | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |



## REVISED Award Notification

|    |  |  |
|----|--|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      ROCKCASTLE COUNTY BOARD OF EDUCATION<br>Street Address     245 RICHMOND ST<br>City, State Zip     MT VERNON, KY 40456  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$59,820.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      ROWAN COUNTY BOARD OF EDUCATION<br>Street Address     121 E SECOND ST<br>City, State Zip     MOREHEAD, KY 40351  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$67,172.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |  |  |                              |   |
|----|--|--|------------------------------|---|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      RUSSELL COUNTY BOARD OF EDUCATION<br>Street Address      404 S MAIN ST<br>City, State Zip      JAMESTOWN, KY 42629   |  | 7                            | <b>Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
|    | 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address      500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact      Vickie Terry: 502-564-1979 ext. 4330<br>Street Address      500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip      Frankfort, KY 40601 | 8                            | <b>Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description      FY15 Title VI-Rural and Low Income<br>Fund Source      NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#      84.358B<br>PR/AWARD NUMBER (FAIN)      S358B140017<br>MUNIS Project Number      350A<br>MOA Number      N/A |  | 9                            | <b>Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
|    | 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | 10                           | <b>Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____   |
| 5  | <b>REVISSED Award Amount:</b><br>\$62,462.00   | 11   | <b>Evaluations:</b>          |   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |                              |   |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |                              |   |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |                              |   |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits  |  | <b>Date:</b> October 3, 2014 |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      RUSSELLVILLE INDEPENDENT BOARD OF EDUCATION<br>Street Address     355 S SUMMER ST<br>City, State Zip     RUSSELLVILLE, KY 42276  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$22,031.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014  |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      SIMPSON COUNTY BOARD OF EDUCATION<br>Street Address     124 MAIN STREET<br>City, State Zip     FRANKLIN, KY 42135  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$61,337.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014  |   |



**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      SOMERSET INDEPENDENT BOARD OF EDUCATION<br>Street Address    305 N COLLEGE ST<br>City, State Zip    SOMERSET, KY 42502   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                           | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)    S358B140017<br>MUNIS Project Number        350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$34,367.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|   |   |
|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name TAYLOR COUNTY BOARD OF EDUCATION<br>Street Address 1209 EAST BROADWAY<br>City, State Zip CAMPBELLSVILLE, KY 42718  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$54,766.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
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| <b>1 Name and Address of Recipient:</b><br>Agency Name      TODD COUNTY BOARD OF EDUCATION<br>Street Address     804 SOUTH MAIN<br>City, State Zip     ELKTON, KY 42220  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$42,292.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

## REVISED Award Notification

|    |  |  |
|----|--|--|
| 1  | <b>Name and Address of Recipient:</b><br>Agency Name      TRIMBLE COUNTY BOARD OF EDUCATION<br>Street Address    68 WENTWORTH AVE.<br>City, State Zip    BEDFORD, KY 40006   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____  |
| 2  | <b>KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                     | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor                                  |
| 3  | <b>Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____<br><br><b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____ |
| 4  | <b>Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  |  |
| 5  | <b>REVISED Award Amount:</b><br>\$28,785.00  | <b>11 Evaluations:</b>   |
| 6  | <b>Period of Award:</b><br>July 1, 2014-September 30, 2016   |  |
| 12 | <b>Consortia/Partnership Members:</b> N/A  |  |
| 13 | <b>Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |  |
| 14 | <b>Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014  |  |

**Kentucky Department of Education**

**REVISED Award Notification**

|  |   |
|--|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name      UNION COUNTY BOARD OF EDUCATION<br>Street Address     510 SOUTH MART STREET<br>City, State Zip     MORGANFIELD, KY 42437   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$48,013.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |



**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      WASHINGTON COUNTY BOARD OF EDUCATION<br>Street Address    120 MACKVILLE HILL<br>City, State Zip    SPRINGFIELD, KY 40069   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$35,033.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> <b>The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.</b>   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits<br><b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      WAYNE COUNTY BOARD OF EDUCATION<br>Street Address     534 ALBANY ROAD<br>City, State Zip     MONTICELLO, KY 42633  | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$68,435.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <span style="float: right;"><b>Date:</b> October 3, 2014</span>   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name WEBSTER COUNTY BOARD OF EDUCATION<br>Street Address 124 MAIN STREET<br>City, State Zip DIXON, KY 42409   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$45,509.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name WHITLEY COUNTY BOARD OF EDUCATION<br>Street Address 116 NORTH 4TH STREET<br>City, State Zip WILLIAMSBURG, KY 40769   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary Secondary Education Act of 1965<br><br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A   | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99   | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$89,386.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |

**Kentucky Department of Education**

**REVISED Award Notification**

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|---|---|
| <b>1 Name and Address of Recipient:</b><br>Agency Name WILLIAMSBURG INDEPENDENT BOARD OF EDUCATION<br>Street Address 1000 MAIN STREET<br>City, State Zip WILLIAMSBURG, KY 40769   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address 500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact Vickie Terry: 502-564-1979 ext. 4330<br>Street Address 500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip Frankfort, KY 40601 | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description FY15 Title VI-Rural and Low Income<br>Fund Source NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br>CFDA# 84.358B<br>PR/AWARD NUMBER (FAIN) S358B140017<br>MUNIS Project Number 350A<br>MOA Number N/A    | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other _____  |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82,<br>85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other _____  |
| <b>5 REVISED Award Amount:</b><br>\$16,954.00   | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016  |   |
| <b>12 Consortia/Partnership Members:</b> N/A  |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The quarterly report for the period ending September 30, 2016 MUST reflect encumbrances.   |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014   |   |



**Kentucky Department of Education**

**REVISED Award Notification**

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| <b>1 Name and Address of Recipient:</b><br>Agency Name      WOLFE COUNTY BOARD OF EDUCATION<br>Street Address    P.O BOX 160<br>City, State Zip    CAMPTON, KY 41301   | <b>7 Fund Type:</b><br><input type="checkbox"/> State<br><input checked="" type="checkbox"/> Federal<br><input type="checkbox"/> Other: _____   |
| <b>2 KDE Contact Information:</b><br>Program Consultant      Vicki Fosbender: 502-564-3791 ext. 4026<br>Street Address              500 Mero Street-8 <sup>th</sup> Floor - CPT<br>Budget Contact              Vickie Terry: 502-564-1979 ext. 4330<br>Street Address              500 Mero Street-16 <sup>th</sup> Floor – CPT<br>City, KY Zip                  Frankfort, KY 40601                         | <b>8 Method of Payment:</b><br><input checked="" type="checkbox"/> Federal Cash Request<br><input type="checkbox"/> Expenditure Reimbursement<br><input type="checkbox"/> Automatic Payment<br><input type="checkbox"/> Lump Sum<br><input type="checkbox"/> Receipt of Invoice from Vendor |
| <b>3 Description/Fund Source of Award and Fiscal Year:</b><br>Description                  FY15 Title VI-Rural and Low Income<br>Fund Source                  NCLB, Title VI, Part B, Subpart 1 of Elementary<br>Secondary Education Act of 1965<br><br>CFDA#                          84.358B<br>PR/AWARD NUMBER (FAIN)   S358B140017<br>MUNIS Project Number       350A<br>MOA Number                  N/A | <b>9 Reimbursement Frequency:</b><br><input checked="" type="checkbox"/> Monthly<br><input type="checkbox"/> Quarterly<br><input type="checkbox"/> Other<br>_____   |
| <b>4 Grant Authority (Source):</b><br>NCLB, Title VI, Part B, Subpart 1 of ESEA, 34 CFR EDGAR Parts 77,79,80, 81,82, 85, 97,98 and 99  | <b>10 Financial Reporting Method:</b><br><input checked="" type="checkbox"/> Electronic Submission <b>CDIP</b><br><input type="checkbox"/> Other<br>_____   |
| <b>5 REVISED Award Amount:</b><br>\$27,544.00  | <b>11 Evaluations:</b>  |
| <b>6 Period of Award:</b><br>July 1, 2014-September 30, 2016   |   |
| <b>12 Consortia/Partnership Members:</b> N/A   |   |
| <b>13 Special Instructions/Conditions:</b> The final Federal Cash Request must be submitted by December 10, 2016. All funds must be spent of encumbered by September 30, 2016. The queerly report for the period ending September 30, 2016 MUST reflect encumbrances.  |   |
| <b>14 Authorized By (Name/Title):</b> Donna Tackett, Director<br>Division of Consolidated Plans and Audits <b>Date:</b> October 3, 2014  |   |